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ABSTRACT

Reducing class size was considered an important element in a revised health course at Gettysburg College (Pennsylvania). However, reducing class size to approximately 15 students per class would require 38 sections, more than the health faculty could handle. To recruit additional instructors, the course was marketed to faculty and administrators as supportive of and complementary to the rigorous academic expectations of the college. This was accomplished by addressing issues (i.e., relationships, chemical health, sexual victimization, diversity, eating disorders, etc.) recognized as negatively impacting on all aspects of students' lives, including their academic success. Recruitment of course instructors, instructor training, and classroom instruction are discussed. Recommendations are also made for ways in which junior and senior high school teachers might recruit individuals from the community to work with small groups within a larger class. (ND)

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REDUCING CLASS SIZE TO INCREASE STUDENT INVOLVEMENT

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Health class is over. Frustration has set in. You have just spent another period trying to get some semblance of meaningful discussion going. You know that your class is too large for many students to ever feel comfortable speaking up in front of their peers. Yet, what can you do about it? You've tried various things. You've had students working alone with work sheets, journals or one-minute reflection papers. You've planned classes where students delve into controversial topics with a partner or as a member of a small group. Although this has worked well, you still wonder if there is some way you could reduce your class size.

The author faced this same question when hired to revise the health course Gettysburg College students are required to take for graduation. Reducing class size to approximately fifteen students per section would require 38 sections. It would be impossible for the handful of health faculty employed to cover these classes yet research shows that this would be an effective way to reach students with a "wellness" message (Erickson & Strommer, 1991; Upcraft, Gardner & Associates, 1989).

Where would the instructors needed to teach multiple sections of this course be found? What other group(s) on campus might have a common mission of reaching students with a pro-active, preventative wellness lifestyle message? How would this course be approved as "academic" by faculty from departments across campus who usually did not understand what "those gym teachers" did in the classroom? After months of listening to concerns of faculty, staff and administrators, the answers to these questions became clear.

The course would be marketed to faculty and administrators as supportive of and complimentary to the rigorous academic expectations of the college. This would be accomplished by addressing issues (i.e. relationships, chemical health, sexual victimization, diversity, eating disorders, etc.) deemed important by personnel in the College Life Division (i.e. Student Life). These issues were recognized as negatively impacting on all areas of students' lives, including their academic success.

Recruitment of Course Instructors

The first step to accomplish the goal of small class size was to sell potential teachers on how this course could help them reach students with messages they were already trying to deliver. The College Life Division (counseling, residence life, health services, chapel) was already frustrated with years of poor attendance at dorm and campus programming. They eagerly signed on for training and constituted "free" labor as teaching the course became part of their duties. One foreign language professor volunteered to teach the course for one semester. Athletic coaches were released from teaching physical activity classes and taught a number of sections. A series of meetings was held with the administration to demonstrate how the course could potentially improve student retention. The administration responded with funding to hire adjunct faculty to teach the remaining sections. These faculty were from a variety of academic backgrounds including health, chemistry, counseling and biology.

Instructor Training

In order to enhance quality of instruction, an Instructors' Training Seminar was held. An institutional grant was written to fund the training and pay each instructor a small stipend to attend the one week, thirty-five hour series of seminars. (In the second year, returning instructors received a smaller stipend for a two-day, fourteen hour update training seminar). These seminars involved instruction on course curriculum as well as hints on leading small discussion groups and working with student journals. Instructors received an Instructors' Manual which contained lesson plans, research articles and student handouts. Instructors also received a common course syllabus and a listing of available audio-visual aids. Monthly luncheons afforded instructors the opportunity to interact with each other in a shared exchange of ideas and concerns.

An Interdisciplinary Steering Committee composed of instructors and administrators reviewed the student and instructor course evaluations following the Fall Semester and made curriculum revisions. The following major content areas were included in the revised course curriculum after the first year:

Values and Beliefs
Goal-setting
Managing Daily Time
Managing Nutrition (2 Days)
Exercising for Fitness (2 Days)
Chemical Health (2 Days)
Eating Disorders
Managing Stress (2 Days)
Sexuality/Intimacy
Sexual Victimization
Diversity
Developing Academic Skills

Sexually Transmitted Diseases	Major and Career
Birth Control/Pregnancy Options	Environmental Wellness
Interpersonal Communication	Grief and Loss
Relationships	Affirmative Living

Classroom Instruction

What actually took place within the classroom? Since the range of topics was quite broad and the instructors' preparation to teach them varied, care had been taken to provide extensive training as well as in depth instructor resources. Within the class session, the instructor intrbduced the topic by providing a brief background on the subject which included recent research. This was followed by students participating in exercises which required self-examination. Following self-examination, time was given for diad and small group discussion. Included in all exercises were questions which required students to look at their own behavior and make plans for behavioral change where warranted. Each session concluded with students writing in their journals. Journals were read and instructor comments noted prior to the next class.

Students and faculty alike reported that the seminar format provided a classroom setting where students felt comfortable speaking in class! Students saw that others were experiencing similar developmental issues and thus, did not feel alone in dealing with this transition time in their lives. Students also reported that they initially entered the course being somewhat annoyed at having to take a health course in college. However,

they found that this class taught them how to examine and change behavior- skills many had not learned in their strictly informational classes of junior and senior high school.

As a result of journal entries, some students were referred to appropriate offices on campus while others developed a dialogue with their instructors which reflected personal introspection and some behavioral change on the part of the students. An additional by-product was that both the Counseling Center and the Health Center reported picking up on first year students' problems sooner than in the past (Records of who seeks services, for what purpose and who, if anyone, referred the student to an office are diligently kept). These students made appointments to discuss personal issues and/or friends they were concerned about prior to crisis situations occurring. In addition, a greater percentage of first year students were represented on the Fall academic Dean's List than in past years. It is not possible to determine statistically what part the new course had in the increased academic success of students as the Dean's office was incorporating a variety of new initiatives into the first year experience. However, through anecdotal references, the Dean felt strongly that the course contributed to the increase in the academic success of students in the freshman class.

Recommendations for Implementation in Other Classroom Settings

Perhaps you teach in junior or senior high school and are thinking, "Fine for those college folks, but how could I reduce my class size?" Good question. Perhaps some of you who teach in

these settings have some suggestions on this. The reality may be that in these settings small group work within a larger class is the best the teacher will be able to do. If this is the case, the teacher may be able to provide supervision and leadership for these small groups by recruiting and training others to come in and assist. There still are individuals in the community who enjoy working with young people. Suggestions for helpers include:

1. Some parents may be able to commit to coming in once or twice a year.
2. The first of the large group of "baby boomers" are fifty years old. Soon, as they begin to retire, some may enjoy a limited commitment to facilitate groups in a topical area of interest to them.
3. Community specialists (Heart Association, Cancer Society, Religious Leaders, etc.) will come into the school if arrangements are made in advance.
4. If there is a college in your community, you may find college students who will commit to a certain number of hours per week assisting you (Community volunteer service is being emphasized on many college campuses).

All of the above takes some advance planning as well as a short training session so that those coming into the classroom know what you want them to do as small group facilitators. But, the benefit of increased student involvement in the classroom will be well worth the energy expended. It is a sweet sound to a teacher's ears to pause during a health class and listen to numerous student

voices as they sit in small groups grappling with health issues that have the potential for tremendous positive or negative impact on their lives!

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